

2007 Special Events City Volunteer Program **Volunteer Application**

Date

Information on this form will help us for your group.	nd the most satisfying and appropriate volunteer projects for you or
_	a group contact person an individual adult volunteer an individual youth volunteer
If group, name of organization/busines	3:
Contact/individual name:	Phone:()Fax:()
Mailing address:	CityZip
Email address	
Emergency Contact:	Relationship Evening Phone: Cell: group: Number of volunteers age 18 or younger:
Day Phone:	Evening Phone: Cell:
Why are you (or your group) interested	group: Number of volunteers age 18 or younger: in volunteer work?
	ire special accommodations due to a disability in order to volunteer? der this in finding suitable volunteer projects:
	any allergies or other medical concerns that we should be aware of? and/or medications you are presently taking:
What days/times are you/your group av	vailable for volunteer projects?
that you or your group may have an int	•
GAIN (Getting Ariz	g Halloween, Oct. 27 th Holly Jolly Festival, Dec. 1 st ona Involved in Neighborhoods) Oct. 20th Difference Projects (on-going)
Signature of Individual/Group Contact Pers	on Parent/Guardian Signature of approval (if volunteer is under 18 years of age

Please return this form to the City of Goodyear, Judi Switanek, PO BOX 5100, Goodyear, AZ 85338 or fax it to 623-882-7811. If you have questions, please call 623-882-7807.

Information on this form is considered public record; therefore, certain information may be released to third parties upon request.